

**DECLARATION, POWER OF ATTORNEY AND PETITION**

As a below named inventor, I hereby declare that:

My residence, citizenship and post office address are as stated below next to my name and signature.

This declaration is of the following type: *(check one)* ☒ original; ☐ design; ☐ supplemental; ☐ national stage of PCT or ☐ divisional, continuation or continuation-in-part.

I believe I am the original, first and sole inventor *(if only one name is listed below)* or an original, first and joint inventor *(if multiple names are listed below)* of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CHECK VERIFICATION SYSTEM AND METHOD**

the specification of which: *(check one)* ☒ is attached hereto; ☐ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_ and is/was amended on \_\_\_\_\_ *(if applicable)* or ☐ was described and claimed in PCT International Application No. \_\_\_\_\_, filed on \_\_\_\_\_ as amended under PCT Article 19 on \_\_\_\_\_ *(if any)*.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby identify below, and where indicated claim foreign priority benefits under Title 35, United States Code §§ 119(a)-(d) or §§ 365(a)-(b) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America, filed within 12 months (6 months for design) prior to this application, and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) on which priority is claimed *(if any)*:

Prior Foreign/PCT Application(s)			Priority claimed	
(Number)	(Country)	Day/month/year filed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below (if any):

60/161,254	October 25, 1999
Provisional Application Number	Filing Date

Provisional Application Number	Filing Date
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I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or § 365(c) of any PCT International Application designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing date)	(patent, pending, abandoned)
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(Application Serial No.)	(Filing date)	(patent, pending, abandoned)
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(Application Serial No.)	(Filing date)	(patent, pending, abandoned)
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint the following practitioner(s): **Randy Lipsitz, Reg. No. 29,189; Philip A. Gilman, Reg. No. 38,160; Richard L. Moss, Reg. No. 39,782; John C. Garces, Reg. No. 40,616; Nicholas L. Coch, Reg. No. 20,065; Peter A. Abruzzese, Reg. No. 26,437; Donald L. Rhoads, Reg. No. 34,705; Chris Kolefas, Reg. No. 35,226; Vito J. Debari, Reg. No. 36,496; Caleb S. Pollack, Reg. No. 37,912; Jonathan S. Caplan, Reg. No. 38,094, Albert B. Chen; Reg. No. 41,667 and Robert E. Alderson, Jr., Reg. No. 44,500** whose correspondence address is:

Kramer Levin Naftalis & Frankel LLP  
919 Third Avenue  
New York, New York 10022

Direct telephone calls to Kramer Levin Naftalis & Frankel LLP:  
(212) 715-9100

as my attorneys with full powers of substitution and revocation, to prosecute this application and to transmit all business in the Patent and Trademark Office connected therewith. Please send all correspondence to the above correspondence address.

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, power of attorney, and this petition.

Full name of sole or first inventor: Alan T. Slater

Inventor's signature: [Signature] Date: 10/23/00

Residence: 10 Jefferson Road, East Brunswick, NJ 08816

Citizenship: United States

Post Office Address: 10 Jefferson Road, East Brunswick, NJ 08816

Full name of second joint inventor: \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of additional joint inventor: \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of additional joint inventor: \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of additional joint inventor: \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Sheets containing additional joint inventors (*check one*) ☐ are, ☒ are not attached hereto.